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ABSTRACT

This booklet describes the Saturday School, a school and home learning program for four-year old children, which emphasis the identification and remediation of learning problems. The program includes: (1) individual diagnosis of children's needs and abilities, (2) half-day Saturday school sessions, (3) weekly home teaching visits, and (4) parent follow-up activities. Children with problems are identified and diagnosed during initial screening and observed and evaluated throughout the year. Inservice teacher training, consultation by specialists, and parent involvement are important aspects of the program. Handicapped children are integrated into regular classes. Both retarded and learning disabled children have made substantial gains and maintained these gains in regular elementary school situations. Several case studies are included. (ED)

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Providing for the Preschool Child with Problems

Parent-Child Early Education Program
Ferguson-Florissant School District
St. Louis County, Missouri.

00002

contents

programing 2
for all four year olds

identifying 3
the child with problems

servicing 4
by specialists

involving 5
the parents

mainstreaming 6
the child with problems

evaluating 7
the program's impact

succeeding 8
some success stories

highlighting 12
scenes at saturday school

concluding 14

Appendix 1: 15
the testing program

The Child with Problems, Defined:

A student with any kind of problem affecting his happiness or ability to learn is considered by this program to be a child with special problems.

00603

Early Education coupled with Early Detection:

TO MOST EFFECTIVELY INCREASE EVERY CHILD'S CHANCE FOR SUCCESS IN SCHOOL---with particular concern for the young child with environmental deficiencies, developmental lags, and real or potential learning problems---the Ferguson Florissant School District developed an early education program for all four year olds that would incorporate the home and involve the parent.

THE RESULTING SCHOOL AND HOME LEARNING PROGRAM, called Saturday School, is designed to successfully meet three primary objectives:

- Early identification and appropriate intervention to remediate or lessen any real or potential problems affecting learning.
- Enriching the home environment and improving parent competencies in working with and teaching the young.
- Contributing measurably to each child's social, emotional and academic growth.

THEREFORE, THE PROGRAM PROVIDES MORE THAN EARLY EDUCATION; it also provides comprehensive testing, diagnosis, and follow-up.

SATURDAY SCHOOL ENROLLS MORE THAN 75% OF THE DISTRICT'S FOUR YEAR OLDS, with an average annual enrollment exceeding 700. Following the screening of every student at the start of the year, 40% evidence a need for further diagnosis. Of these, almost half are found to have some kind of problem.

OF THE *TOTAL* NUMBER OF ENROLLED STUDENTS, *an approximate 15% warrant some kind of special attention due to handicapping conditions or problems affecting their learning.* Interestingly, the percentage of students with special problems grows each year---due to an increased effectiveness in identification as well as the program's growing reputation in this area.

THIS REPORT, THEN, DESCRIBES PRIMARILY OUR EXPERIENCES in providing for the preschool child with problems. . .

00004

programing

for all district four year olds

. . . including those with special problems or handicaps

The program's four part approach:

Diagnosis

THE NEEDS AND ABILITIES OF EVERY CHILD ARE ASSESSED at the start of the year. Those who evidence a need receive further indepth diagnosis. Consultants and teacher-specialists follow up at school and at home to provide assistance as needed to the children with problems, their parents and teachers.

School on Saturdays

AT MORNING OR AFTERNOON SESSIONS ON SATURDAYS, all children, including those with special problems, participate in total group activities; then rotate in small groups to four different learning centers conducted by a teacher or parent. Activities relate to language, math, motor, art, auditory and visual discrimination.

Home Teaching

WEEKLY HOME TEACHING VISITS, with one child or a few neighboring children, include the parents as well. During the hour visit, the teacher involves the child and parent in learning activities and suggests home activities relating to each child's needs. Teaching-specialists provide home teaching for children with varying handicapping conditions.

Parent Follow-up

AT HOME THROUGH THE WEEK, parents informally continue with concept and skill development activities. Parents receive a weekly HOME ACTIVITY GUIDE that outlines in detail a number of "games" from which to choose. Each parent and child also share lending library books. Parents grow measurably during the year in their abilities to work with young children.

00605

identifying

the child with problems

. . . by teachers, parents, specialists and consultants

Saturday School's comprehensive testing and diagnostic program includes:*

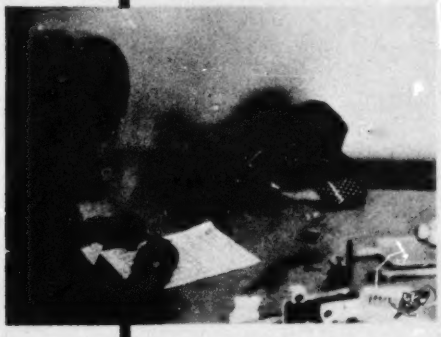
Initial Screening

AN INDIVIDUAL EVALUATION OF EACH CHILD'S needs and abilities is made by his teachers and parents at the beginning of the year. Vision and hearing tests are also given to every child. These are reviewed by both teacher-specialists and consultants. Those children who evidence a need receive further testing.

Indepth Diagnosis

MORE THAN 40% OF THE CHILDREN EVIDENCE A NEED for further evaluation due to possible visual, hearing, or speech impairment; low intellectual functioning; emotional problems; language difficulties; or perceptual disorders.

Continued Observation



OBSERVING A CHILD OVER A PERIOD OF TIME IN VARYING CIRCUMSTANCES---at home and at school, in learning and social situations ---provides teachers and specialists with a broader based appraisal of the child's problems. Classroom observation also alerts them to other children needing special attention, undetected by the initial screening.

Ongoing Evaluation

TEACHERS AND SPECIALISTS CONTINUE TO EVALUATE THROUGH THE YEAR by formally testing each child's performance level of specific skills.

TEACHING AT SATURDAY SCHOOL PROVIDES PARENTS with an opportunity to evaluate their own child's performance in comparison to his peers.

**Also see Appendix 1: The Testing Program*

00006

servicing

by specialists

. . . to staff, parents and child

The program employs consultants in child psychology and family counseling; and half-time teaching-specialists to work with children evidencing language problems, learning disabilities, low intellectual functioning or physical handicaps. Specialists' responsibilities include:

Teacher Training

CONSULTANTS AND SPECIALISTS CONDUCT A TWO-WEEK TRAINING PROGRAM before school starts---along with several inservice sessions through the year. Training emphasizes testing and evaluation, appropriate learning experiences and teaching techniques, task analysis, enhancing skill development, child development, and working with parents.

Personalized Programming

THE TEACHER-SPECIALISTS ESTABLISH IMMEDIATE AND LONG-RANGE OBJECTIVES for each child they visit to improve learning deficits, behavior and parent-child relationships.

Teaching and Consulting

At Home

TEACHER-SPECIALISTS visit children with learning or communication problems. The frequency of teaching visits depends on the child's needs; they may be daily or weekly, short or long-term.

At School

SPECIALISTS work with children needing special help and also observe how the children they see individually respond to learning in a group situation.

CONSULTANTS visit Saturday School to observe and work with children having special problems and to consult with teachers and parents.

00007

involving

the parents

. . . at home and at school

The structure of the program provides opportunities to affect change in the home and enlist parent help, cooperation, and understanding---without which success would be limited. Parents are involved in:

Identifying

EVERY PARENT EVALUATES HIS CHILD'S DEVELOPMENT at the start of the year on a 65-item skill and behavior checklist. Information supplied by parents has been found to be very reliable and is carefully reviewed.

Report of Findings

IF A DEFINITE PROBLEM IS INDICATED on the basis of initial screening tests, parents' evaluation and/or indepth diagnosis, teacher-specialists interpret the findings to parents in terms of their child's strengths and weaknesses. This provides a basis for parental understanding of their child's needs, problem(s) and the necessity of appropriate follow-up at home and at school.

Home Teaching and Follow-up

PARENTS LEARN FROM THE TEACHING AND POSITIVE REINFORCEMENT TECHNIQUES used by the teacher-specialists during home teaching visits. Specialists also advise parents on the why and how of home follow-up---with conscious emphasis on the child's strengths.

CONSULTANTS CONFER WITH PARENTS of children who evidence problems. The number of contacts with an individual family varies according to need. When necessary, referrals are made to outside agencies.

Teaching at School

PARENTS' ACTIVE PARTICIPATION AT SATURDAY SCHOOL affords them an opportunity to appraise their own child's performance in relation to others his own age.

00008

mainstreaming

the child with problems

Mainstreaming as the program applies it:

Integrating children with varying degrees of handicapping conditions into the regular school and classroom; with as many opportunities as possible to join the activities as accepted members of their non-handicapped peers; yet providing the specialized attention or services that each require both at school and in the home.*

At Saturday School

MOST CHILDREN WITH HANDICAPPING CONDITIONS OR SPECIAL PROBLEMS are able to participate in all Saturday School activities. Those children requiring individual attention for a portion of the day are worked with by high school or college student volunteers, under the supervision of the classroom teacher.

CHILDREN WITH EXTREMELY SEVERE PROBLEMS OR HANDICAPS usually need the full attention of an adult. Specialists or instructional aides provide this necessary one-to-one relationship. This constant attention provides the child with immediate positive reinforcement.

Home Teaching Visits

CHILDREN WITH SPECIAL PROBLEMS ARE SEEN INDIVIDUALLY BY TEACHER-SPECIALISTS. Those needing the stimulation, competition or social experience of peers may additionally join a small group of children receiving visits from a regular teacher.

CHILDREN WITH MINOR PROBLEMS MAY BE SEEN EXCLUSIVELY BY THE REGULAR TEACHER on either an individual or small group basis. Teachers and specialists discuss effective ways of handling these children at weekly staff meetings.

**The program has not refused entry to any child, regardless of the nature or severity of the problem.*

00009

evaluating

the program's impact

Pre and post tests measured the gains of all Saturday School students during the program's first three years. *The progress made by students with special problems or handicaps was particularly significant:*

Program Year Gains

THE THIRD WITH THE LOWEST ENTERING SCORES, *which included all those with problems or handicaps,* showed substantial gains of:

17 months in intellectual growth (16)*
20 months in language development (15)*
16.5 months in visual-motor skills (12)*

STUDENTS DIAGNOSED AS LEARNING DISABLED averaged:

15 months in intellectual growth
22 months in language development
11 months in visual-motor skills

CHILDREN TESTING WITHIN THE RETARDED RANGE averaged a significant improvement of 10 months in both mental and social age, as measured by psychological testing and parent evaluation. By each year's end, 7 out of 8 tested out of this range! *It should be noted, however, that many students initially scored within the retarded range---not because of true retardation---but because of untreated learning problems or being educationally deprived.*

CHILDREN WITH EMOTIONAL PROBLEMS showed marked improvement in behavior and relationships with peers, as rated by their parents and Saturday School teachers. These gains were sustained according to ratings by their kindergarten teachers. THE PARENTS OF HANDICAPPED CHILDREN were also pre and post rated, and showed significant improvement in interactions with their children.

Gains Sustained

UPON ENTERING KINDERGARTEN AND FIRST GRADE, *former students with learning problems or handicaps scored higher on the Screening Test of Academic Readiness than a normal group of children having no preschool experience!*

**As a frame of reference---the average gains of all students. (All figures are three-year averages, with 7 months between testing each year.)*

00010

succeeding

. . . some success stories

The preceding figures tell only a part of the story. The picture is incomplete unless also viewed in terms of the individual child and his parents---the Toms, Sues, Janes, Kevins and their mothers and dads---who spent a year in the program and personally felt its impact.*

...For Karen, initially diagnosed as retarded, but testing out of this range by year's end, Saturday School has meant she could enter public school and achieve success. *By mid-kindergarten year, she was reading!*

...For Jack, nearly blind since birth, a previously undetected hearing problem was discovered. A hearing aid and an intensive language-learning program opened up *a whole new world of sound and verbal communication.*

...For Cindy, bright as a dollar, but with an acute inability to follow even the simplest directions, *a leap of 24 months in auditory memory skills.*

But again, the story is half told if the programing and special services that bring about these kinds of results are left unsaid. So let's examine the case folders of a representative few. . .

...Terry C.: Found untestable on all of the program's formal screening instruments, Terry looked sad, indifferent, and seldom smiled.

Hospital and speech clinic records revealed: a pronounced delay in all aspects of development---walking, talking, toilet training, etc.; on medication for hyperactivity; and unintelligible speech.

**The names have been changed. The facts of their cases have not.*

00011

At the time of entry into the program, he was judged to be functioning within the moderate to retarded range and was receiving speech therapy at a leading university clinic.

During the program's testing, Terry evidenced exceptional skills in visual discrimination of letters and numbers. Yet, his behavior was marked by crying and temper tantrums. He had an inability to converse, with echolaic speech patterns. To *"What is your name?"*, he would respond, *"What is your name?"* His articulation, however, was good and motor skills appeared normal.

At Saturday School, he was docile, did not relate to other children, and appeared to comprehend directions only when visually presented.

At twice-a-week home visits by a specialist, it was noted that Terry's jargon was almost totally single letters. In fact, he talked in letters! So the specialist wrote on an index card, "Hi, Terry Carter. My name is Pat Teich." It had to be read only once and he remembered what it said!

Subsequently, all language was taught through writing on index cards. Eventually, the card was removed and Terry could respond appropriately. For example, to: *"What's your name?"* (without index card), Terry could respond: *"My name is Terry Carter."* As the year progressed, he learned to respond appropriately to many what and who questions, and learned many concepts. He also began writing on a blackboard. At first, only single words, then phrases, then sentences. From this, he progressed to writing responses to questions and commands, such as: "Sit down, please."

By year's end, he was able to carry on a brief conversation. The use of meaningless jargon ceased and was replaced by meaningful words. Crying fits and temper tantrums decreased markedly.

Although Terry had made a great deal of progress by the end of the year, he was still in need of special help. He was not playing with other children or relating well to adults. Program consultants recommended to the parents a special program placement for kindergarten. He is now enrolled in a small class for children with emotional and learning problems.

...Janie T: On screening tests upon entry into the program, the following areas of weakness were noted: grammatic closure, auditory memory and fine motor skills. However, she was very verbal and appeared to be bright and interested in everything around her. At Saturday School she needed a great deal of structure; she had a very difficult time attending to a task.

Janie was seen by her regular teacher so she and her mother could benefit from group interaction between other parents and their children. She was also seen by a specialist once a week. Emphasis was placed on developing the auditory channel for learning. Her visual modality, the modality she primarily utilized in learning, was very good. The goal was to enable Janie to cope with and derive meaning from the auditory stimuli around her. A program to develop fine motor skills was also initiated and monitored throughout the year.

By year's end, she had made a gain of 4 years, 11 months in fine motor skills. There was no real perceptual problem; it was suspected that she simply had not had experience with these kinds of skills prior to entry into the program. *A gain of 1 year was evidenced in auditory memory and 1 year, 2 months in grammatic closure. Although she will always be a visual learner, she was using auditory stimuli around her in a more meaningful way. Her behavior in a group situation had improved greatly. She was generally able to work in a small group and complete a task.*

continued

...Steve D: Steve has had cerebral palsy and spastic paraplegia from birth; he is ambulatory but does wear leg braces. At the time of entry into the program, his speech was unintelligible; most words were primarily one syllable utterances. Socially, he did not relate well to his peers or adults. He was very manipulative and demanding. Steve also possessed an overconfident attitude in solving tasks; he seemed unaware of his errors and evidenced no anxiety regarding his failures.

Steve was enrolled in a community school for cerebral palsied children 3 days a week. The school reported that he was functioning within the upper limits of the educable mentally retarded range of intellectual functioning. It was felt, however, that had he not had the speech and language restrictions, his cognitive potential might be within the average range.

Steve received a home teaching visit once a week: speech therapy to improve articulation of sounds and language therapy to increase and improve length and quality of vocalizations. Therapy was hampered, however, because of his behavior patterns. A behavior modification program was established that produced positive results.

At the close of Steve's in Saturday School, there was a great change. He became much more cooperative and self-confident. He responded to discipline. His self-help skills and relationships with peers and adults improved drastically. He appeared to be ready for more academic work. His ability to be an effective participant in a therapy session markedly improved. His articulation and sentence structure were rapidly maturing.

Following this year, it was recommended that Steve be evaluated by the Special School District of St. Louis County. The parents followed through and Steve is now in an orthopedically handicapped classroom.

...Sharon L.: Sharon, at four, was not talking. She hardly said a word. Before entering the program, Sharon's parents had taken her to a pediatrician, a neurologist, and a speech and hearing clinic. But her parents still did not know what her problem was. There had been numerous tests, but no diagnosis; no real explanation.

Saturday School specialists and consultants diagnosed Sharon's problem as expressive aphasia* (an inability to express language).

Specialized home-teaching, along with parent follow-up, was followed at midyear with further diagnosis by the Special School District. *This resulted in Sharon's subsequent placement in a new special school district class for 5 year olds with language problems. She is progressing very well.*

Most typical of the vast majority of cases, however, are those who enter the program without their parents even detecting or suspecting a problem of any kind. Yet, very often the problem may be sufficiently acute to impede later

continued

This case is not unusual. Saturday School consultants often bring together for a family the information already obtained by other specialists---along with their own testing. This can result in finding the answer to a previously mis-diagnosed or elusive problem. Saturday School consultants and specialists have the advantage of viewing all testing from a broader, educationally-based perspective than specialists representing a single field. And of course, the program then has the additional asset of being able to provide necessary follow-through that medical specialists and many clinics are not equipped to do.

00013

learning. These are the children who would enter the mainstream of the public school system to undoubtedly falter somewhere along the way. . .

...For example, Jim: educationally deprived, he initially scored 62 on an individually administered intelligence test. *When retested six months later, he scored 88---out of the retarded range!*

...Or Joey: whose mother had never given him a crayon or pencil, and on initial testing was unable to reproduce anything on paper. *By year's end: a gain of 2 years, 6 months in fine motor skills.*

...Or Amy, whose immature speech caused her undue embarrassment. Following a year of speech therapy: *a 14-month gain in language development AND a much happier child---contributing easily in group situations.*

...Or Jeff, whose awkward body movements and control prevented him from successful experiences on the playground or in the gym. After an intensive home program to develop gross motor skills, *he was on a par with his peers and enjoying the normal running, jumping and ball-bouncing games of his classmates---with a corresponding improvement in his sociability*

...Or Larry, who at the beginning of the year had such a short attention span he had to have the constant attention of an aide to monitor his behavior. *By year's end, he was functioning normally and unattended in learning activities.*

HOW QUICKLY PROBLEMS CAN BE ELIMINATED OR DIMINISHED WHEN CAUGHT DURING THE YOUNG YEARS! *By the end of the year, many problems had been remediated.* And certainly all others had resulted in a greater awareness and understanding on the part of both the parents and the school as to the true nature of each child's problem and the appropriate path to follow.

00014

highlighting

. . .some scenes at saturday school

...Young Matt, a blind student, and Herb Ward, a 17 year old high school volunteer, were a familiar pair at a Saturday School Center one year. You might see them feeling their way around the building, touching and talking about the different surfaces---brick, concrete, wood and glass; or lightly stroking a tree's bark, limbs and leaves; or sitting on the ground running their fingers through the grass. Or you might see them working together at a table, as shown in the picture to the left.

Furthermore, Herb didn't miss working with his young charge a single solitary Saturday during the entire year---even when it meant, as it did more than once, walking the more than 2-mile distance from his home in the rain or through the snow to get there. When complimented by the teacher for his never-fail attendance, Herb would simply shrug and say, *"I know Matt depends on me."*

...Carol bursts with excitement at being a student in Saturday School and happily joins every regular activity. She is such a skilled lip reader (she has been a student at the Central Institute for the Deaf since she was one year old) that you would never suspect that she is totally deaf. The only tipoff is when one of the children, wanting to get her attention, will gently place his hand on her cheek to turn her head toward his moving lips.

...Betty giggled at David's fumbling the first day of school. But before too many Saturdays, she was seen strolling down the hall with a hand firmly placed on Dave's shoulder and looking up at a visitor to volunteer spontaneously, *"David's blind. . . so I always help him because he can't always feel where he should go."*

00015

...On the last day of school, a mother rushed up to a teacher and thrust a note into the teacher's hand as she said, *"I'd tell you what this year means if. . .if I could."**

The note said, in part:

"...Only a parent who lives around the clock with a boy like Jamie knows the intense frustration and deep feelings of guilt from lashing back and from harboring feelings of hate. I just didn't have a day of peace and quiet. It affected the harmony of our home and everyone in it.

I don't mean to say that everything is perfect now, but this past year---especially these last few months---have made such a difference. Just knowing why Jamie acts as he does---and knowing what to do about it has lifted such a tremendous burden for us all. And we all get along with Jamie so much better now. I couldn't help but think about this last night as I tucked him into bed and kissed him goodnight. There was a feeling there between us that just hadn't been there before. . ."

**At the beginning of the year, the behavior of her child volleyed from outbursts of temper and kicking tantrums, to withdrawal to the corner of a room curled up like a sleeping kitten. Although the family had been seeking help since the child was two, the only answer had been "mentally retarded." Program specialists discovered the child had an acute inability to either receive or relay anything aurally---although he could read words and was, by year's end, a whiz at "Scramble!" A language program moving from the written word to the spoken word was initiated and intensely followed through by his parents. In fact, the father occasionally would miss work to sit in on the specialist's home-teaching visits.*

00016

concluding:

successful program components

Involving

RESEARCH IN EARLY EDUCATION, AS WELL AS OUR OWN EXPERIENCE, SUBSTANTIATES THE VALUE OF PARENT INVOLVEMENT AND HOME FOLLOW-THROUGH. Success would otherwise be limited, particularly in the case of children with problems. And in some situations, unless there is an accompanying change in the home, success would be impossible. The child, parents and teachers benefit mutually from a program structured to enhance the home, not pre-empt it.

Identifying and Following-up

THE PROGRAM'S TESTING, IN-DEPTH DIAGNOSIS AND OBSERVATION AT SCHOOL AND HOME PINPOINTS VERY SPECIFICALLY THE CHILD'S PROBLEMS AND PARTICULAR LEARNING STYLE.* A learning program is then prescribed for both the home and school, based on the child's learning strengths---in order to diminish his learning weakness. Identification, without accompanying follow-up, would be of limited value.

Mainstreaming

AGAIN, RESEARCH SUPPORTS THE NECESSITY AND INTRINSIC VALUE OF INTEGRATING THE HANDICAPPED CHILD WITH HIS NORMAL PEER GROUP. A child models himself after his peers. His expectations, both for himself and others, can then be established in reference to a heterogeneous world rather than a handicapped one.

THE "NORMAL" CHILD HAS MUCH TO GAIN FROM MAINSTREAMING, TOO. Tolerance of differences in others can develop into true acceptance and understanding at an early age.

Keeping in touch

SATURDAY SCHOOL TEACHERS CONVEY PERTINENT INFORMATION about each student to the kindergarten teacher who will receive him. This is done at an end-of-the-year in-service so the teachers can confer personally as they pass on the records.

SPECIAL SERVICES CONTINUE FOR FORMER SATURDAY SCHOOL STUDENTS WITH LEARNING PROBLEMS. Elementary guidance counselors follow up on those children who, in the opinion of Child Development Consultants, need further service. The children are also observed in kindergarten by program specialists, who in turn discuss with the kindergarten teacher certain recommendations for programing. Title I teachers in Title I schools provide direct service through individualized teaching.

**Despite the program's emphasis on identification, program specialists and consultants are deliberately reluctant to label. Children are treated in terms of their strengths and weaknesses.*

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Appendix 1

THE TESTING PROGRAM

A page from the Beery Test administered to a Saturday School student. Initial screening, as well as subsequent diagnosis, evidenced serious emotional problems.

The actual sample from the Berry Test is not available for reproduction at this time. The test form is copyrighted, 1964, Keith E. Beery and Norman A. Buktenica, Chicago.

00018

Initial Screening

TESTS

AT THE BEGINNING OF THE YEAR, THE FOLLOWING THREE TESTS are administered individually to each child:

- The Slosson Intelligence Test
- Beery Test of Visual-Motor Integration
- The Merrill Preschool Language Test

These tests measure:

Mental age

Perceptual age

Auditory comprehension

Verbal expression age

Total language age

The tester is also asked to relate any special observations about the child during the testing situation.

AT THE BEGINNING OF THE YEAR, EACH PARENT EVALUATES HIS CHILD using a form called, "My Preschool Child." This provides information about the child's

- personal and social development
- language and concept development
- physical skill development
- interests and experiences
- any problems the child may have

ADDITIONALLY, VISION AND HEARING TESTS are administered individually to every child by an audiologist or nurse. An average of 12% are recommended for further testing by the doctor or clinic of their choice.

SIX WEEKS TO TWO MONTHS AFTER SCHOOL STARTS, teachers rate the children on The Nursery Self Adjustment Scale and Coopersmith's Rating Scale of Self Esteem.

TEST ADMINISTRATOR

REGULAR SATURDAY SCHOOL TEACHERS ADMINISTER THE INITIAL THREE SCREENING TESTS. They receive special training on testing before the start of school.

TEACHERS ASSUME THE ROLE OF TESTER ON THE INITIAL SCREENING to provide them with a greater respect for the information gained---and a better understanding of the child being tested. Since the teacher will be working closely with the child throughout the year, this equips her to provide a more personalized program to meet each student's needs.

SCORING

ALL INITIAL SCREENING TESTS ARE THEN EVALUATED BY PROGRAM SPECIALISTS AND CONSULTANTS.

- A SPECIALIST IN LEARNING DISORDERS carefully reviews each child's folder to determine if there may be a need for either more extensive diagnostic testing or just informal classroom observation.
- A CONSULTANT PSYCHOLOGIST also reviews each folder to determine if the child may be evidencing possible emotional problems.

THE SPECIALIST AND CONSULTANTS MAKE NOTE OF ANY CHILD SUSPECTED OF HAVING A PROBLEM---whether slight or severe. Depending on the circumstances, they then either

- Contact the parent to arrange for a further testing, or
- Plan to personally observe the child in the classroom over an extended period of time.

Further Diagnosis

CHILDREN EVIDENCING A NEED FOR FURTHER TESTING are given "The Preschool Screening System" by a teacher-specialist. This tool is constructed to identify preschool children with potential learning problems.

ADDITIONALLY, THOSE CHILDREN SUSPECTED OF LOW INTELLECTUAL FUNCTIONING are given the Stanford Binet Intelligence Test and the parents evaluate their child on the Vineland Social Maturity Scale. These instruments are administered by a program clinical psychologist.

CHILDREN REQUIRING CERTAIN TYPES OF TESTING or indepth diagnosis may be referred to a private or public agency or clinic.

Our experience over a three-year period, with an average annual enrollment of 700:

- Following the initial screening, 40% evidence a need for further diagnosis.
- Of those receiving this additional testing, almost half are found to have some kind of problem(s) warranting special attention or services.

An average of 15% of the total number of enrolled students warrant special program services because of handicapping conditions or problems affecting their learning.

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1974-75
A DEVELOPER-DEMONSTRATION PROGRAM
Title III, Sec. 306, ESEA

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00021